LAKE COUNTY BUILDING DEPARTMENT

27 Woodland Road, Painesville, Ohio 44077
Tel: 440-350-2636 440-918-2636 Fax: 440-350-2660
www.lakecountyohio.gov/buildinginspection

DEMOLITION PERMIT APPLICATION

DATE SUBMITTED:		
TYPE OF STRUCTURE TO BE DEMOLISHED:		
NAME OF STRUCTURE (BUSINESS) TO BE D	DEMOLISHED (IF APPLICABLE	:):
ADDRESS:		
CITY/TOWNSHIP:		
DESCRIPTION OF SITE INDICATING PROPOS		
ZONING PERMIT #	(Copy MUS	T be Attached)
IF A ZONING PERMIT IS <u>NOT</u> BEING ISSUED ZONING PERMIT: NAME:	- NAME & TELEPHONE # OF	ZONING OFFICIAL WHO WAIVED
Date the OHIO E.P.A. NOTIFICATION OF DEM	E: (Co	py of SIGNED Form MUST be Attached)
OWNER'S (CONSENT FOR DEMO	DITION
OWNER'S SIGNATURE:		
OWNER'S PRINTED NAME:		
OWNER'S ADDRESS:		
PHONE NUMBER: ()	FAX NIIMB	SER: ()
It is the duty of the General Contractor to insure that and approved by the Lake County Building Department completion of the demolition.	all utilities are properly disconnec	ted and the required inspections are scheduled
It is the duty of the General Contractor to insure that and approved by the Lake County Building Departme	all utilities are properly disconnecent. The General Contractor is resort commenced within 12 months, or	ted and the required inspections are scheduled ponsible to obtain a <u>Final</u> inspection at the
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APPLICANT NOTIFIED: _____ PERMIT FEE: _____ LOG NUMBER: _____